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SECRETARY OF STATE
ALLABASSEE FLORIDA

O SIMMONS FEB 28 2019

### COVER LETTER

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TO:

TO:	Registration Division of 0	Section Corporation:	s				
SUBJE	KeyGle	e Investments	s, LLC.				
			Name of	Limited Liability (	Company		
						insact Business in Florida," company to transact busin	
Please	return all corre	spondence co	oncerning this matter to the	following:			
	Jay	den Hunter R	unyon				
			Ni	ame of Person	·		
	Kej	/Glee Investr	nents, LLC.				
		·····	Fi	rm/Company			
	212	J.S. Mill Av	e Suite #205				
				Address			
	Ter	npe, AZ 8528	32				
	<del></del>		City/S	tate and Zip Code			
	Hunt	er@KeyGlee	.com				
			E-mail address: (to be used	for future annual	report not	ification)	
For furt	her informatio	n concerning	this matter, please call:				
	Jayden Hunt	er Runyon		208 at (	650-016	51	
		Name of	Contact Person	Area Code	Day	time Telephone Number	
	MAILING A Division of C Registration P.O. Box 63 Tallahassee,	Corporations Section 27			Division e Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, F1, 32301	
Enclose	ed is a check fo		ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop	

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 665,6902, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF PLORIDA:

	Limited Liability Company; must include "Lim	the manney company, mane, or a	j
name unavailable, enter alternate r	same adopted for the purpose of transacting business in E	forida. The alternate name must include "Limit	ed Liability Company," "L. L.C," or "LLC"]
Arizona		3	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(I·I:	I number, (l'applicable)
N/A			
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to deter	to (egistration ) mine penalty liability)	
2121 S. Mill Ave Suite	#205	6. 2121 S. Mill Ave Suite	#205 主治 罗
(Street Address of	Principal Office	(Madie	ig Address
Tempe, AZ 85282	<del></del>	Tempe, AZ 85282	
			<u> </u>
			宝儿 强 口
Name and street addre	ss of Florida registered agent: (P.O. Be	ox NOT acceptable)	D PH 12: 00
Name:	Caleb Cruz		₩ 00
	1931 Currence Programs Preiss #201		, )
Office Address:	1831 Cypress Preserve Drive #204	· · ·	
Office Address:		, Florida <u>33549</u>	<u> </u>
egistered agent's accep	Lutz (Cny)	, Florida 33549	
egistered agent's accep aving been named as re signated in this applica comply with the provis	Lutz  (Cay)  (Annce:  registered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the propers of my position as registered agent.	f process for the above stated lin as registered agent and agree to er and complete performance of	nited liability company at the pla act in this capacity. I further a
egistered agent's accep aving been named as re signated in this applica comply with the provis	Lutz  (Cay)  (Annce:  registered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the propers of my position as registered agent.	f process for the above stated lin as registered agent and agree to er and complete performance of	nited liability company at the pla act in this capacity. I further a
egistered agent's accep aving been named as re esignated in this applica comply with the provis ad accept the obligation	Lutz  (Cay)  (Annce:  registered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the propers of my position as registered agent.	f process for the above stated lin as registered agent and agree to er and complete performance of (**signature)	nited liability company at the pla o act in this capacity. I further a my duties, and I am familiar wi
egistered agent's acception are agent as resignated in this application comply with the provised accept the obligation.  The name, title or caps	Lutz  (City)  Attance:  Trance:  Trance	f process for the above stated lin as registered agent and agree to er and complete performance of (Cognitine)	nited liability company at the pla o act in this capacity. I further a f my duties, and I am familiar wi
egistered agent's accepaving been named as resignated in this applicated in this application accept the obligation.  The name, title or capacity:	Lutz  (City)  Attance:  Sigistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the propers of my position as registered agent.  (Registered agent accity and address of the person(s) who Name and Address:	f process for the above stated lin as registered agent and agree to er and complete performance of (sognature) has/have authority to manage is/a Title or Capacity: MEMBER	nited liability company at the pla o act in this capacity. I further a f my duties, and I am familiar wi are:  Name and Address:
egistered agent's acceptiving been named as resignated in this application comply with the provision accept the obligation.  The name, title or capacity:	Lutz  (City)  Attance:  Sigistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the propers of my position as registered agent.  (Registered agent accity and address of the person(s) who Name and Address:  Josiah Grimes  2121 S. Mill Ave Suite #205	f process for the above stated lin as registered agent and agree to er and complete performance of (sognature) has/have authority to manage is/a Title or Capacity: MEMBER	nited liability company at the plan of act in this capacity. I further a my duties, and I am familiar with are:  Name and Address:  Jamil Damji 2121 S. Mill Ave Suite #
egistered agent's acceptiving been named as resignated in this application of accept the obligation.  The name, title or captivities or Capacity:  MEMBER	Lutz  Cary  Itance:  Ingistered agent and to accept service of tion. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent.  (Registered agent accept the appointment ions of all statutes relative to the property of my position as registered agent.  (Registered agent accept and address of the person(s) who Name and Address:  Josiah Grimes  2121 S. Mill Ave Suite #205  Tempe, AZ 85282	f process for the above stated lin as registered agent and agree to er and complete performance of (sognature)  has/have authority to manage is/a Title or Capacity:  MEMBER  MEMBER	nited liability company at the play of act in this capacity. I further a my duties, and I am familiar with a my duties.  Name and Address:  Jamil Damji  2121 S. Mill Ave Suite # Tempe, AZ 85282

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Symmetre of an authorized person

Variday Henricay Ringin





# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

#### KEYGLEE INVESTMENTS, LLC

ACC file number: L22089405

was incorporated under the laws of the State of Arizona on 08/08/2017, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date. 02/12/2019

Matthew Neubert, Interim Executive Director



